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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
10:081,986	02/25/2002	David C. Putallaz		9955

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EXAMINER

PAYNE, SHARON E

ART UNIT	PAPER NUMBER
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Please find below and/or attached an Office communication concerning this application or proceeding.



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Paper No.

NOTICE OF FEE DEFICIENCY

The informality regarding the payment of the fee is indicated below in connection with

- ☐ the original filing of the application and/or preliminary amendment (e.g. additional claim fees)
- ☐ the reply filed on _____ . The reply is not fully responsive to the prior Office action because of the _____ following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.

FEE(S) DUE

- ☐ 1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance* is due within the time period set below.
- ☒ 2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due to Account 1165 400001 / 4730 (Card type + last 4 digits ONLY) was refused. The balance* is due within the time period set below.
- ☐ 3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
- ☐ 4. The filing fee of \$ _____ submitted in this application is insufficient. A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
- ☐ 5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

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103 605 41587
Legal Instruments Examiner (LIE) or Clerk of Group

Inquires regarding this Notice should be addressed to the above at _____ (insert Phone Number).